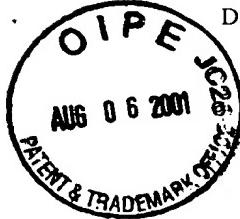


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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE WITH SUFFICIENT POSTAGE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C., 20231, ON:



Date: July 30, 2001

By: Faye D. Knowles

Faye D. Knowles

Patent
Attorney's Docket No. 033136-087

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **RECEIVED**

In re Patent Application of

)

Pavel Hamet et al.

)

Group Art Unit: 1651

Application No.: 09/480,260

)

Examiner: M. Meller

Filed: January 11, 2000

)

For: PRECONDITIONING CELLS AGAINST)
CELL DEATH)

AUG 09 2001

TECH CENTER 1600/2900

AMENDMENT/REPLY TRANSMITTAL LETTER

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Enclosed is a reply to the Office Action mailed January 30, 2001, for the above-identified patent application.

- A Petition for 3-Month Extension of Time is also enclosed.
- A Terminal Disclaimer and a check for [] \$55.00 (248) [] \$110.00 (148) to cover the requisite Government fee are also enclosed.
- Also enclosed is a check in the amount of \$535.00 to cover the cost of \$445.00 for Petition for 3-month Extension of time and \$90.00 for filing of claim fees; return postcard.
- Small entity status is hereby claimed.
- Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the[] \$355.00 (279) [] \$710.00 (179) fee due under 37 C.F.R. § 1.17(e).
- Applicant(s) previously submitted ___, on ___, for which continued examination is requested.

- [] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (146/246) is also enclosed.
- [] No additional claim fee is required.
- [x] An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	28	MINUS = 18	10	× \$18.00 (103) =	\$180.00
Independent Claims	2	MINUS = 3	-0-	× \$80.00 (102) =	-0-
If Amendment adds multiple dependent claims, add \$270.00 (104)					-0-
Total Amendment Fee					\$180.00
If small entity status is claimed, subtract 50% of Total Amendment Fee					\$90.00
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$90.00

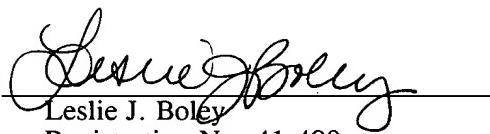
[x] A claim fee in the amount of \$ 90.00 is enclosed.

[] Charge \$ _____ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: 
Leslie J. Boley
Registration No. 41,490

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(650) 622-2300

Date: July 30, 2001